									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001													
CLAIMS AS FILED - PART I								10065373					
_			(Colum		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN		
TOTAL CLAIMS			20					RATE	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 370.00		OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			-30 minus 20=		•			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			4 minus 3 =		1			X42= (j2).		OR	X84=		
MULTIPLE DEPENDENT CLAIM PR			RESENT							1			
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=	1	OR	+280=		
. CLAIMS AS AMENDED . DART II								TOTAL	412	OR			
_	(Column 1) (Column 2) (Column 3)						)	SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENTA		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total,	• 18	Minus	- 20		=	] [	X\$ 9=		OR	X\$18=		
	Independent	• U	Minus	DENIDENT			11	X42=		ОЯ	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<b>J</b> [	+140=		OR	+280=		
S NO.							L	YOTAL ODIT, FEE		OR	TOTAL ADDIT, FEE		
	1/2	(Column 1)		(Colum		(Column 3)		WDII. PEC			AUUII. PEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE/	
	Total	. 14	Minus	- 2	0	<b>=</b>		X\$ 9=		OR	X\$18=		
AME	Independent FIRST PRESE	ependent •   Minus •  ST PRESENTATION OF MULTIPLE DEPEN		PENDENT	CLAIM		I	X42=		OR	X84≖		
	•					<u></u>	' [	+140=		OR	+280=		
			•				_ A	TOTAL DDIT, FEE		OR	TOTAL		
		(Column 1)		(Colum	n 2) .	(Column 3)			,				
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	4.0			П	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		8		X42=			X84¤		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1  -	+140=		OR			
• 11	If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		ber Previously Paid					er tourn	d in the ap	propriate box	in coh	pmn 1.		
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